

Best Available Copy

CLAIMS ONLY						Application Number	Filing Date	
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		May be used for additional claims or amendments	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1							51	
2							52	
3							53	
4							54	
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42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
Total Indep.	2						Total Indep.	
Total Depend		2					Total Depend	
Total Claims	2	2					Total Claims	